

International Meeting on Gonorrhoea *Torremolinos, Spain, March 25-26, 1971*

An international meeting on gonorrhoea, sponsored by the Gaetano Zambon Foundation of Milan, was held on March 25 and 26, 1971, at Hotel Alay, Torremolinos, Spain, under the chairmanship of Prof. J. Gay Prieto, M.D. (Central University Department of Dermatology and Venereology, Madrid).

The introductory paper on 'The Present Status of Gonorrhoea Control' was presented by Dr. T. Guthe, M.D. (Service of Venereal Diseases and Treponematoses, WHO, Geneva), and the chairmen of sessions were as follows:

Epidemiology: Dr. R. Küss, M.D. (St. Louis Hospital, Paris)

Microbiology, Diagnosis, and Treatment:

First session: Dr. R. R. Willcox, M.D. (St. Mary's Hospital, London)

Second session: Dr. T. Guthe, M.D.

Sixteen papers were presented and authors' summaries are published below:

INTRODUCTION

Present Status of Gonorrhoea Control. T. GUTHE (*Service of Venereal Diseases and Treponematoses, World Health Organization, Geneva, Switzerland*)

Epidemiological factors and changing ecological conditions have greatly facilitated the national and international spread of gonorrhoea and its worldwide rising incidence. Gonorrhoea is currently 'out of control' and in some areas epidemic. Drug resistance among circulating strains of gonococci is not a major contributing factor; several effective—albeit more costly—antibiotics are in reserve for therapeutic use against strains partially resistant to penicillin. The increasing public health problem presented by gonorrhoea is mainly due to non-medical environmental factors. If medical progress is to neutralize the present upward trend of incidence, immunological research must be accelerated and coordinated in a concentrated effort. Such research should be directed towards

- Definition of a simple, practical seroimmunological test capable of rapidly diagnosing the disease, notably in asymptomatic infected females who represent the main reservoir of infection

- Clarification of humoral and cellular immunity processes and the development—if possible—of an agent or a vaccine capable of producing immunoprotection. Recent experiences concerning immunity to the meningococcus provide a background of some interest.

EPIDEMIOLOGY

Factors which Increase the Spread of Gonorrhoea.

L. JUHLIN (*Department of Dermatology and Venereology, University Hospital, Uppsala, Sweden*)

In Sweden the number of cases of gonorrhoea has greatly increased in the last 10 years, and the problem has been aggravated by the changing clinical picture. The symptoms of gonorrhoea were usually easily recognized in the past, but now 20 per cent. of the men as well as 55 per cent. of the women have no symptoms at all. This is the principal reason why complications of gonorrhoea are today more frequent and often very severe. On the other hand, treatment with penicillin is still effective and the few failures of treatment do not alone account for the increased incidence. Investigations among students at Uppsala showed that sexual education and information on venereal diseases were sufficient but there was a general reluctance to undergo medical examination. Moreover the high frequency of multiple sexual intercourse contributed to the spread of the disease.

Our efforts to prevent the increase of gonorrhoea, by antibiotic prophylaxis, early case finding, and availability of medical examination, have not been successful. Intensive information on gonorrhoea and its treatment, given by the press, radio, and television, is another possibility that we think would be worth exploring.

Epidemiological Trend of Gonorrhoea in Recent Years. H. DELUNE (*Association of Belgian Professional Unions of Specialist Physicians, Brussels, Belgium*)

Complete data on the incidence of gonorrhoea in Belgium cannot be obtained for reasons which are presented, but there is ample evidence of a constant increase in the number of cases. Epidemiological data are shown concerning the distribution of gonorrhoea in different categories of persons, and in both sexes according to age and occupation, and the spread of infection is examined in relation to nationality, sex, and age.

The conclusion is that gonorrhoea is much more widespread in Belgium than the statistical data suggest. In Belgium gonorrhoea occupies the second place, after tuberculosis, in the list of notifiable diseases. The recrudescence of gonorrhoea has been influenced by 'sexual vagabondage' which is more and more common among the young, particularly among girls. The main causes apart from prostitution, are the frequent opportunities of meeting casual partners, who are difficult to track down and are the major disseminators of the gonococcus.

Considerations on Gonorrhoea in the Middle East.

F. ATALLAH (*French Faculty of Medicine, Department of Genito-Urinary Surgery, Beirut, Lebanon*)